

Worksheet - Annual Targets for Victim/Witness Program Service Objectives (Victims)

Directions: Please indicate the number of victims your program proposes to serve in FY2013 and FY2014. Below that list the number of victims who will receive specific services. (See Victim/Witness Codebook for complete service objectives. Please note: not every victim will receive every service.)

Number of Direct Service Victims to be Served by Program in FY2013

FY2014

<u>Required Objectives</u>	<u>Annual Targets</u> <u>FY2013</u> <u>FY2014</u>	<u>Required Objectives</u>	<u>Annual Targets</u> <u>FY2013</u> <u>FY14</u>
®1. Victims' Rights Information (Pre-Printed)		9. Liaison re: Prisoner Status	
®2. Victims' Rights Explanation		®10. Victim Impact Statements	
A. Protection (Phone) (In Person)		®11. Confidentiality Forms	
B. Financial Assistance (Phone) (In Person)		®12. Interpreter Services	
C. Notices (Phone) (In Person)		13. Crisis Intervention	
D. Victim Input (Phone) (In Person)		14. Support Services A. Follow-Up Counseling B. Victim Support Groups	
E. Courtroom Assistance (Phone) (In Person)		15. Crisis Referrals (Phone) (In Person)	
® 3. Protection		16. Case Status	
A. Protective Order		17. Dispositions	
i) Domestic Violence		18. Criminal Justice Process - Options Explanation	
ii) Child Abuse		19. Courtroom Tours	
iii) Elder Abuse		20. Criminal Justice Process A. Support B. Explanation of Steps	
iv) Other		21. Parole Input	
B. Law Enforcement Protection		22. Transport	
C. Other		23. Escort	
4. Compensation			
® A. Explanation			
B. Services			
C. Follow-Up			
®5. Property			
®6. Restitution Assistance/Referral			
A. Services			
i) Explanation			
ii) Monitoring			
iii) Collection			
iv) Enforcement			
v) Other			
B. Total Amounts	____n/a____		
7. Intercession			
® A. Employer			
B. Other			
®8. Notification Assistance			

Worksheet - Annual Targets for Victim/Witness Program Service Objectives
(Victims - cont'd)

- | <u>Optional Objectives</u> | <u>Annual Targets</u>
<u>FY2013</u> <u>FY2014</u> |
|---|--|
| 24. Advanced Notice of Judicial Proceedings | |
| 25. Forensic | |
| 26. Closed Preliminary Hearings | |
| 27. Closed Circuit TV | |
| 28. Crime Prevention | |
| 29. Emergency Assistance | |
| A. Direct | |
| B. Referral | |
| 30. Business Restitution | |
| A. Services | |
| i) Explanation | |
| ii) Monitoring | |
| iii) Collection | |
| iv) Enforcement | |
| v) Other | |
| B. Total Amounts | ____ n/a ____ |
| 31. Transportation Services | |
| A. Reservations | |
| B. Reimbursements | |
| C. Other | |
| 32. Appeal/Habeas Corpus Services | |
| 33. OTHER (Specify) | |

Program Development

Check below to indicate whether these three requirements have been met or will be met.

- | | | |
|--|--|---|
| ®1. Separate Waiting Areas
2. Directory of Services
3. Continuance Notification | <input type="checkbox"/> Yes
<input type="checkbox"/> Yes
<input type="checkbox"/> Yes | <input type="checkbox"/> No
<input type="checkbox"/> No
<input type="checkbox"/> No |
|--|--|---|

® Denotes required by Virginia's Crime Victim and Witness Rights Act.